| • | | | | | | | | Application or Docket Number | | | | | | | |
|--|--|-----------------------------------|--------------------------------|-------------------|----------------------------|---|--------------|------------------------------|------------------------|------------|---------------------|------------------------|--|--|--|
| • | PATENT APPLICATION FEE DETERMINATION RECOF | | | | | | | | | | | | | | |
| | | | | | | | | 1996oars | | | | | | | |
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | SM/ Typ | | | OR | OTHER SMALL I | | | | |
| TOTAL CLAIMS | | | 6 | | | | R | ATE | FEE | | RATE | FEE | | | |
| FOR | | | NUMBER FILED | | NUMBER EXTRA | | BAG | BASIC FEE 35 | | OR | BASIC FEE | 710.00 | | | |
| TOTAL CHARGEABLE CLAIMS | | | 6 minus 20= | | • | | × | \$ 9= | | OR | X\$18= | | | | |
| INDEPENDENT CLAIMS | | | minus 3 = | | • | | X40= | | | OR | X80≈ | | | | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | | | | +1 | +135= | | OR | +270= | | | | | |
| * If the difference in column 1 is less than zero, enter *0" in column 2 | | | | | | | TC | TAL | 3550 | OR | TOTAL | · | | | |
| 5 1 ELAMS AS AMENDED - PART II | | | | | | | | | | | REHTO | | | | |
| , | | (Column 1) | | (Colu | | (Column 3) | SN | IALL | ENTITY | OR | SMALL | | | | |
| ENT A | | REMAINING AFTER AMENDMENT | | NUM PREVIO | BER OUSLY | PRESENT EXTRA | R | ATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | | | |
| AMENDMENT | Total | 20 | Minus | . 20 . | | 1 | × | 9= | | OR | X\$18= | · | | | |
| AME | Independent | · 3 | Minus | | | | х | 40 = | | OR | X80= | · | | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | 35= | | OR | +270= | | | | |
| | 7 BEST AVAILABLE COPY | | | | | | | TOTAL | | 00 | TOTAL | | | | |
| 7 | -31-0 | | (Column 2) (Column 3) | | | ADD | T. FEE | | | ADDIT. FEE | | | | | |
| AMENDMENT B | | (Column 1) CLAIMS REMAINING | .; . | HIGHEST NUMBER | | PRESENT | | | ADDI- | | | ADDI- | | | |
| | | AFTER AMENDMENT | | PREVI | OUSLY | EXTRA | | ATE | TIONAL FEE | | RATE | TIONAL | | | |
| | Total | ·al | Minus | •2 | 0 | • / | × | 5.00 | 25.00 | OR | X\$18= | $\sqrt{}$ | | | |
| | Independent | • 3 | Minus | *** | <u>3</u> | | × | 00 .OD | | OR | X80= | Λ | | | |
| | FIRST PRESE | NTATION OF MU | LTIPLE DEP | ENUEN | CLAIM | | 1 | | | OR | +270= | | | | |
| | | | | | | | | TOTAL T. FEE | | OR | YOYAL | - | | | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | | | • • • • | ADDIT. FEE | · | | | |
| S | | CLAIMS REMAINING | | HIGH | EST | PRESENT | | | ADDI- | 1 | | ADDI- | | | |
| AMENDMENT C | | AFTER . | | | OUSLY | EXTRA | R. | ATE | TIONAL FEE | | RATE | TIONAL FEE | | | |
| | Total | • | Minus | •• | | 5 | X | 9= | | OR | X\$18= | | | | |
| | Independent | • | Minus | ••• | | • | × | 10= | | OR | X80= | | | | |
| - | FIRST PRESE | NTATION OF MI | JLTIPLE DEF | ENDEN | CLAIM | | - | 25 | | | +270= | | | | |
| لـــا | | | | | | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." APPLY 555 | | | | | | | | | |
| | | | | | | | . - | OTAL | | OR | YOTAL | | | | |
| ••• | f the "Highest Nur If the "Highest Nu | | id For IN THI id For IN THI | S SPACE | s less that Is less tha | n 20, enter "20." in 3, enter "3." | - ADDI | OTAL T. FEE | | OR | YOTAL ADDIT, FEE | | | | |

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